# L200000 48801

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400353163934

10/05/20--010:4--020 \*\*60.00

O SIMMONS





## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 13, 2020

LINDA YOUNG 880 CARILLON PKWY ST EPTERSBURG, FL 33716

SUBJECT: RJAHF 13-GRANDVIEW SENIOR RESIDENCES L.L.C.

Ref. Number: L20000048801

We have received your document for RJAHF 13-GRANDVIEW SENIOR RESIDENCES L.L.C. and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 620A00022664

Octavia L Simmons
Regulatory Specialist II Supervisor

www.sunbiz.org

### **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

Div	ision of Cor	porations					
SUBJECT:	RJAHF 13-Grandview Senior Residences L.L.C.						
SUBJECT.		Name of Lim	ited Liability Company				
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return	all correspo	ndence concerning this matter	to the following:				
		Linda Young					
			Name of Person				
		Raymond James Tax Cred	it Funds, Inc.				
			Firm/Company	<del></del>			
		880 Carillon Parkway					
			Address				
		St. Petersburg, FL 33716					
			City/State and Zip Code				
		linda.young@raymondjame					
		E-mail address: (	to be used for future annual report no	tification)			
For further is	nformation co	oncerning this matter, please co	all:				
Linda Young		727 567-6156 at ( )					
	Name of	Person	Area Code Daytii	ne Telephone Number			
Enclosed is a	check for th	e following amount:					
□ \$25.00 F	filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
	iling Addres		Street Address:	agtion			
Registration Section Division of Corporations			Registration Section Division of Corporations				
	). Box 632		The Centre of Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RJAHF 13-Grandview Senior Residences L.L.C.

(Name of the Limited Liability Company as it now appears on our records.)

1	A Florida Limited Liability Company)	
The Articles of Organization for this Limited Li Florida document number L20000048801	ability Company were filed on Fe	bruary 11, 2020 and assigned
This amendment is submitted to amend the follo	wing:	
A. If amending name, enter the new name of	the limited liability company he	ere:
N/A		
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the d	designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	able: N/A	
(Principal office address MUST BE A STREE	T ADDRESS)	
Enter new mailing address, if applicable:	N/A	
(Mailing address MAY BE A POST OFFICE I	<u> </u>	
B. If amending the registered agent and/or reagent and/or the new registered office addres		ecords, enter the name of the new regis
Name of New Registered Agent:	N/A	
New Registered Office Address:	Enter Flo	rida street address
		. Florida
	City	Zip Code

#### New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address 15	Type of Action
MGR	Raymond James Tax Credit Fund XX L.L.C.	880 Carillon Parkway	□Add
		St. Petersburg, FL 33716	■Remove
		<del></del>	□Change
MGR	Raymond James Affordable Housing Fund 13 L.L.C.	880 Carillon Parkway	■Add
		St. Petersburg, FL 33716	□Remove
			□ Add
			□Remove
			□Change
		<del></del>	□Add
		<del></del>	□Remove
			□Change
			□Add
			□Remove
			□ Change
			Remove
			CiChange

	4						
						113	33
				<del> </del>			_
							_
	·				···	· · · -	_
							_
	<del></del>						_
		<del></del>	<del></del>				-
	<u>.</u>						_
							_
	<del></del>	<u> </u>					<del>-</del>
			<del></del>			····	_
					<del></del>		_
			<del>-</del>				_
							_
_							_
fective	date, if other th	han the date of f	iling:		(0	ptional)	
an effecti ote: If	ive date is listed, the the date inserted i	: date must be specifi in this block does :	c and cannot be pri	or to date of filing	g or more than 90 days :	after filing.) Pursuant to 6 this date will not be li	05.0207 sted as
cument	i's effective date of	on the Department	of State's record	is.	ming requirements,	inis date will not be it	3100 23
ecord s	necifies a delayed	l effective date: bu	t not an effective	time at 12:01	a muon the earlier of	f: (b) The 90th day af	er the
is filed.		. cricetive ditte, ou	r not an encente	time, at 12.01	a.m. on the carrier of	i. (o) The John day ar	ioi tiio
se ated	ptember 30		2020				
aicu			,	<u> </u>			
				` <b>^^</b>			
				\/ \\ \ \ .			
		Signature	of a metriber or au	thorized represen	tative of a member		
		•				-13 L.L.C., the Managing dview Senior Residences	

Filing Fee: \$25.00